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*To ensure access to high-quality,
patient-centered, cost-effective
health care to Los Angeles County
residents through direct services at
DHS facilities and through
collaboration with community and
university partners.*



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April 24, 2014

TO: Each Supervisor

FROM:  Mitchell H. Katz, M.D.
Director



SUBJECT: HOUSING FOR HEALTH QUARTERLY REPORT

On January 14, 2014, the Board instructed the Director of the Department of Health Services (DHS) to submit quarterly reports to the Board on Housing for Health (HFH) permanent supportive housing outcomes including funds, costs, number and composition of clients housed; integrated health, mental health, substance disorder and benefits establishment results; utilization rate and duration of housing subsidies; number of clients transitioning off of housing subsidies; and characteristics of housing units secured.

BACKGROUND

In November 2012, DHS established the HFH division to expand access to supportive housing for DHS patients who are homeless and who have complex medical and behavioral health conditions and/or are high utilizers of DHS services.

HFH utilizes the full range of community based housing options including non-profit owned supportive housing, affordable housing, master lease buildings, scattered site housing, and private market housing. Tenants receive federal rental subsidies such as Section 8 Project Based or Tenant Based Vouchers or a local rental subsidy through the Flexible Housing Subsidy Pool (FHSP). All individuals who are housed through HFH programs are assigned to a homeless services provider to receive Intensive Case Management Services (ICMS). These services include outreach and engagement; case management with on-going monitoring and follow-up; linkage to health, mental health, and substance use disorder services; assistance with benefits establishment; assistance with life skills, job skills, and educational and volunteer opportunities; crisis intervention, etc. ICMS providers provide "whatever it takes" wraparound services to assist clients in regaining stability and improved health.

QUARTERLY UPDATE

Flexible Housing Subsidy Pool

On January 14, 2014, the Board approved a Work Order for Property Related Tenant Services (PRTS) with West Bay Housing Corporation to operate the FHSP. In the months of February and March, West Bay Housing Corporation, in collaboration with HFH, quickly ramped up the rental subsidy program by developing policies and procedures, conducting housing location and acquisition activities, and by March 11th, was already moving DHS patients into permanent supportive housing. As of March 31st, 24 DHS patients have been housed using the FHSP.

Permanent Supportive Housing Funds/Costs

The source of funds for the FHSP is existing DHS County General Fund dollars, the Conrad N. Hilton Foundation, and the office of Supervisor Mark Ridley-Thomas. Since the Work Order was executed during this quarter, the costs for the first quarter of operation of the Flexible Housing Subsidy Pool will be provided in the next quarterly report.

The source of funds for contracted ICMS services in permanent supportive housing is existing DHS County General Fund dollars. The estimated cost for contracted ICMS services in Fiscal Year 2013-14 is \$1.5 million.

The source of funds for the PRTS contract to operate the South Los Angeles Supportive Housing Program is existing DHS County General Fund dollars. The estimated cost for Fiscal Year 2013-14 is \$665,000.

Number of Clients Housed

HFH clients are DHS patients who are homeless and who have complex medical and behavioral health conditions and/or are high utilizers of DHS services.

- **Total # of patients who have attained housing:** Since November 2012, HFH has placed 310 homeless DHS patients with complex medical and behavioral health conditions in permanent supportive housing.
- **Total # of patients who are currently housed:** 298 patients are currently housed.
- **Total # of patients housed this quarter:** From January 1 to March 31, 2014, HFH housed 31 patients. 20 individuals and 4 families were housed through the FHSP and the remaining 7 clients were housed with Tenant or Project Based Section 8 vouchers.

Demographics of Clients Housed (Attachment I).

- **Gender:** 67% (208) of patients housed are male, 32% (99) are female, and 1% (3) are transgender.
- **Age:** 45% (140) of patients housed are age 50-59, followed by 24% (74) age 40-49, 15% (45) age 60 and above, 10% (32) age 30-39, 5% (16) age 18-29, and 1% (3) 70 and over.
- **Race/ethnicity:** 44% (135) of patients housed are Black, African, or African American; 22% (68) are Latino; 22% (68) are White; 3% (9) are Asian; and 10% (30) are other or unknown.
- **Homeless Status:** The average length of time that patients experienced homelessness was 3 years and 7 months and the median length of time was 2 years. The majority of HFH clients were chronically homeless (83%), which means they were homeless for more than one year or experienced four or more episodes of homelessness in the last three years.

Most frequent medical conditions: The most common diagnoses for HFH clients are as follows: hypertension, diabetes, congestive heart failure and heart disease, asthma, cancer, HIV/AIDS, hepatitis C, lung disease, depression, bipolar disorder, and post-traumatic stress disorder.

Utilization Rate and Duration of Housing Subsidies: After six months in housing, 96% of our tenants remained housed (N=139) and after 12 months of housing, 96% of our tenants remained housed (N=27).

Exits from housing this quarter: Since November 2012, 12 tenants have exited the HFH program, including 3 tenants exited housing this quarter. One was incarcerated, one evicted, and one moved to a higher level of care.

Subsidy types for tenants in housing (N = 298):

- 106 (36%) Housing Authority of the City of Los Angeles (HACLA) Tenant Based Vouchers
- 98 (33%) HACLA Project Based Vouchers
- 24 (8%) FHSP
- 20 (7%) Housing Authority of the County of Los Angeles (HACoLA) Project Based Vouchers
- 17 (6%) DHS South LA scattered site rental subsidy (will be transitioned to FHSP on July 1, 2014)
- 13 (4%) HACoLA Tenant Based Vouchers
- 9 (3%) Los Angeles Homeless Services Authority (LAHSA) rental subsidy
- 6 (2%) Placed in affordable housing without rental subsidy
- 3 (1%) HACLA Shelter Plus Care
- 2 (1%) HACoLA Public Housing

Integrated Health, Mental Health, and Substance Use Disorder Services and Benefits Establishment

HFH plans to provide service utilization data on client use of DHS, Mental Health, Public Health (Substance Abuse Prevention and Control), Sheriff, and Probation services on an annual basis using Enterprise Linkage Program (ELP) data from the Chief Executive Office Service Integration Branch. The lag time in data entry and the cost of collecting and preparing the data make quarterly reporting infeasible. This data will also be used for a larger program evaluation to be completed in early 2017. However, we have partial data as follows:

- **Health care coverage:** The majority of clients have health care coverage. As of, February 2014, 92% have Medi-Cal (55% have Medi-Cal and 37% had Healthy Way LA and transitioned to Medi-Cal on January 1, 2014), 3% have Medi-Cal/Medicare, 2% have Medicare, and 1% have other insurance.
- **DMH service utilization:** As of February 2014, 60% of patients housed have received DMH services and 25% have an active/open DMH case.
- **DPH service utilization:** As of February 2014, 9% of patients housed have received substance use disorder treatment services in the last year from DPH Substance Abuse Prevention and Control contracted providers.

All clients in HFH permanent supportive housing projects are DHS patients and they all have an assigned ICMS provider. All case management services are mobile and provided at the location where the client is housed. Health, mental health, and substance use disorder services are provided in a way that is flexible to accommodate different types of permanent supportive housing projects. Larger project-based permanent supportive housing projects often have dedicated space for on-site health, mental health, and/or substance use disorder services. Scattered site projects typically link clients to services that are conveniently located in the surrounding community.

Whether project based or scattered site, it is a key role of the ICMS provider to ensure that HFH clients are linked to and accessing health, mental health, and substance use disorder services as needed. ICMS providers assist clients with appointment scheduling, transportation, maintaining their medication regimen, and with urgent access to care if the client is experiencing an urgent health, mental health or substance use issue. Another critical role of the ICMS provider is to assist clients with obtaining any health and income benefits that they may be eligible for. During the client intake and assessment process, the ICMS provider obtains information on the client's health and income benefits. If the client appears to be eligible for a benefit they are not currently receiving, the ICMS provider will assist them with obtaining any necessary documents and completing and tracking applications for DPSS Services (CalFresh, Medi-Cal, GR, CalWORKs, and IHSS) and SSI.

Characteristics of Housing Units Secured

Units in the HFH portfolio range in size and type across the County from large apartment buildings to smaller single family homes and are appropriate to household size and composition.

This quarter 24 units were subsidized with the Flexible Housing Subsidy Pool:

- 20 studio units in SPA 4. All units were furnished using Home for Good move-in assistance funds. Furnishings include bed, table and chairs, sofa, lamps, kitchen stand, bed linens, and kitchen supplies.
- 1 2-bedroom and 3 3-bedroom units in SPA 1. All units came furnished and security deposits were funded using Home for Good move-in assistance funds.

NEW EXECUTED WORK ORDERS

Pursuant to the Supportive Housing Services Master Agreement approved by the Board on June 19, 2012, this is to advise the Board that DHS has executed Work Orders to the Supportive Housing Service Master Agreement for ICMS with five agencies: JWCH Institute, Inc., PATH, Lamp Community, Antelope Valley Community Clinic, and LA Family Housing. County Counsel has reviewed and approved the Work Orders.

The Work Order executed with JWCH Institute, Inc., is for the purpose of providing recuperative care services to homeless patients being discharged from DHS hospitals. The Work Order executed with PATH is for the purpose of providing interim housing for homeless DHS patients who are moving into permanent supportive housing. The Work Orders executed with Lamp Community, Antelope Valley Community Clinic, and LA Family Housing are for providing ICMS in project based and scattered site supportive housing locations.

In addition, on January 14, 2014, the Board approved a Work Order for PRTS with West Bay Housing Corporation to operate the FHSP.

Many supportive housing projects that will be funded by the FHSP have an existing agreement between the developer and a support services provider. As a result, in order to refer tenants into the building it is necessary for DHS to enter into a Work Order for ICMS with the support services provider already connected to the property. DHS is typically able to leverage capital dollars and/or rental subsidies that the developer secured to build and operate the project in exchange for a nominal ICMS Work Order to provide support services to DHS tenants in the building.

An example of such a project is the Star Apartments, which are owned and operated by Skid Row Housing Trust (SRHT). SRHT secured \$37 million from housing financing sources to build the Star Apartments and the Housing Authority of the City of Los Angeles has provided Project Based Section 8 vouchers for the building at an estimated

value of \$12 million over 10 years. The ICMS Work Order with SRHT allowed 100 patients who were homeless with complex medical and behavioral health conditions and who were high utilizers of DHS services to move into new homes at the Star Apartments.

DHS will continue to pursue supportive housing opportunities that leverage capital and/or operating funding secured by the project developer. As appropriate, DHS will execute an ICMS Work Order with the support services provider already connected to the project if the provider has an executed Master Agreement for Supportive Housing Services. For projects without an existing support services provider DHS will release a Work Order Solicitation and agencies with an executed Master Agreement will be eligible to submit a response.

NEXT STEPS

The next quarterly report will be provided to your Board in July 2014. If you have any questions, please contact me or Mark Ghaly, Director of Community Health, at (213) 240-7702.

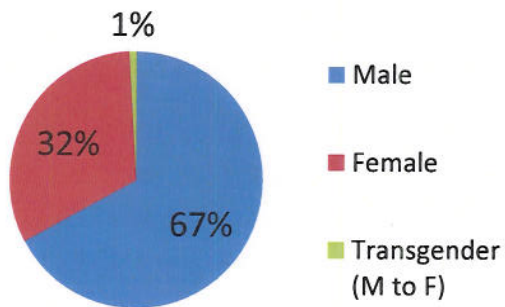
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Attachment

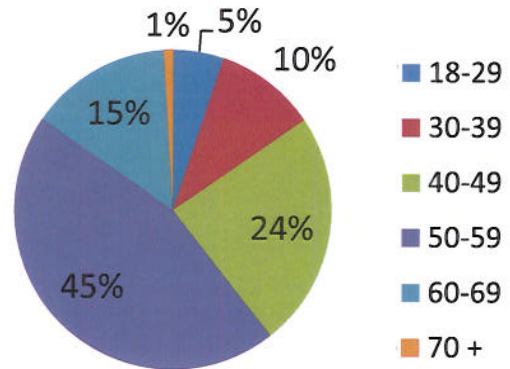
c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors

Attachment I

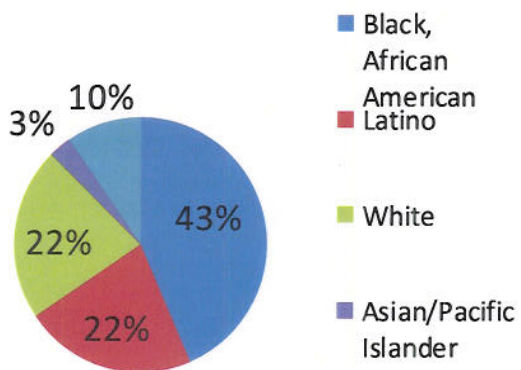
Gender



Age



Ethnicity



Homeless Status

